

MULTIPLE INDEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

CLAIMS

MULTIPLE INDEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)						SERIAL NO.		FILING DATE	
						APPLICANT(S)			
CLAIMS									
AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT		IND.	DEP.	IND.	DEP.
1								51	
2								52	
3								53	
4								54	
5								55	
6								56	
7								57	
8								58	
9								59	
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11								61	
12								62	
13								63	
14								64	
15								65	
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41								91	
42								92	
43								93	
44								94	
45								95	
46								96	
47								97	
48								98	
49								99	
50								100	
TOTAL IND.								TOTAL IND.	
TOTAL DEP.								TOTAL DEP.	
TOTAL CLAIMS								TOTAL CLAIMS	